



**SUWANEE MUNICIPAL COURT
CREDIT CARD PAYMENT FORM**

Citation Number : _____

Type of Card: _____ VISA _____ MASTERCARD _____ DISCOVER
_____ AMERICAN EXPRESS

Card Number : _____

Expiration Date: _____

Amount : _____

Cardmember acknowledges receipt of goods and/or service in the amount of the total shown hereon and agrees to perform the obligations set forth by the cardmember's agreement with the issuer.

Signature: _____

Telephone: () _____

E-mail: _____

**PRINT FORM & MAIL TO THE COURT ADDRESS AT THE BOTTOM OF
YOUR CITATION. PLEASE INCLUDE COPY OF YOUR CITATION.**